

immoral, builds one in his own breast, and beholds one formed for him in the breasts of his fellow brethren of mankind. "I stand up for law," says Shylock. Shylock had the letter, but nothing else\*.

I now close the subject. My strictures may appear severe, but I trust they cannot be regarded as undeserved.

## II.

*Five Cases of Puerperal Fever, successfully treated, with Remarks.* By WILLIAM GAITSKELL, Rotherhithe, Member of the Royal College of Surgeons, and of the Society of Apothecaries, London.

THE great number of cases of puerperal fever which have lately occurred in various parts of England, have particularly directed the attention of practitioners to the investigation of the pathology of that disease, and to the establishment of a more decisive method of cure than was formerly pursued. The following cases are chiefly interesting on account of the success of the treatment; and their principal merit is that of truth.

### CASE I.

On Saturday, the 18th of February last, about two o'clock in the morning, I was called to attend Mrs. B., a young woman of tender health, in labour of her second child. The labour, which terminated in the space of an hour, was natural; the child alive, and healthy; and, in a few hours afterwards, it was put to the breast, and sucked without inconvenience to the mother. The patient was ordered barley water, plain grit gruel, veal, chicken, or beef tea, as diet; with a cool room, and quietness.

19th. The after-pains were troublesome; but the lochia flowed properly, both in quantity and colour. To relieve the pains, I directed my attention to the bowels, and ordered the following pills:

R. Pulveris Jalapæ,  
Extracti Colocynthis comp. āā ʒss.

Aquæ q. s. ut fiat massa, in pilulas xij. dividenda. Capt. ij tertiis horis donec alvus responderit.

After taking three doses, two dark-coloured fœtid stools

\* We must acknowledge that we do not clearly comprehend the force of our correspondent's observations on the cautions of *ἡ δὲ νοσοβοηθός* regarding the law relative to procuring abortion. The knowledge of law does not entail a stigma upon honourable men; and there have been instances of medical practitioners rendering themselves amenable to the penalties of this law.—EDITORS.

were procured. The pulse was 80; the head free from pain; the skin moist; the tongue clean; the bladder relieved; and the after-pains abated.

20th. About two o'clock in the morning, forty-seven hours after delivery, she was suddenly attacked with a shivering fit, followed by fever; a distracting pain in the head, and tenderness in the left hypochondrium, which in a short time increased to acute pain, extending to the groin and the navel. The pulse beat 120. The lochia were diminished, but not suppressed. I immediately abstracted sixteen ounces of blood from the arm; and as two stools only had been procured by the pills, the following mixture was prescribed:

R Sodæ Phosphatis ℥ss.  
Syrupi Rhamni,  
Tincturæ Sennæ aa f℥ss.

Infus. Sennæ f℥ivss. Fiat mistura, cujus capiat cochl. larg. ij. 2da quaque hora, donec alvus soluta fuerit.

The third dose operated, and removed from the bowels three dark-coloured, slimy, offensive stools. The abdomen was then fomented with flannels wrung from hot decoction of chamomile flowers; and glysters of gruel injected, as emollients. In six hours more, the pulse rose to 130, when the bleeding was repeated, and the purging mixture ordered to be given every four hours. In the next six hours three more stools were procured, similar to the former; but without the wished-for relief. The pulse now rose to 140. The abdominal pain was more diffused; but the head relieved. The bleeding was repeated to the amount of sixteen ounces; and the purgative mixture continued until several stools were evacuated, which mitigated the symptoms, and in six hours more brought the pulse down to 130. The bleeding being again repeated, reduced the pulse to 120, with great relief to the abdominal pain, as well as the affection of the head. A slight cough now, however, intervened, which added greatly to the sufferings of the patient; who was forced to incline on her back, no other position being practicable.

22d. Wednesday evening. The pulse being still 120, the skin hot, the tongue furred, the abdomen tender, and cough troublesome, I repeated the bleeding, purging, and glysters, which reduced the pulse to 110. The bleeding was nevertheless again had recourse to, being the sixth time, when the pulse sunk to 90, with an abatement of every dangerous symptom.

The bowels were now kept in action by sulphate of magnesia given every four hours, in doses of ℥ij. dissolved in infusion of roses; which procured six stools a day, of better appearance; and, by the 8th of March, complete convalescence took place, and a gradual recovery of health.

The blood, which was drawn, was firm, and highly inflamed.

excepting the last quantity, the crassamentum of which was loose in texture, and the crust of a greenish yellow hue.

### CASE II.

Mrs. A., a healthy young woman, about twenty-six years of age, living in the same court with Mrs. B., was delivered about eleven o'clock in the forenoon of the same day, Saturday the 18th of February. This was her second child. The labour was natural and easy; and on the following Sunday she had every symptom of doing well; but on Monday a slight febrile attack ensued, with trifling pains in the hypogastric region, which I attempted to remove by purging. For this purpose, she took two large spoonfuls of the saline senna mixture every three hours. The second dose operated, and four dark-coloured offensive stools were procured. The same evening, about fifty hours after delivery, a shivering fit occurred, followed by fever, with violent head-ache and increase of abdominal pain. The pulse was 120. To arrest the threatened mischief, I instantly abstracted sixteen ounces of blood from the arm, gave her three grains of calomel with fifteen of jalap; and afterwards several doses of the purging mixture, exhibiting emollient injections, and applying fomentations. Next morning, Wednesday the 22d, the pulse having sunk to 100, the action of the bowels was kept up by moderate doses of sulphate of magnesia, until Sunday the 26th, when the pulse was reduced to the natural standard. Convalescence now took place, and the strength of the patient was gradually recruited.

She remains in health, and is an excellent nurse to her child.

### CASE III.

Mrs. B., sister-in-law to Mrs. B., (Case I.) residing within a few doors of her house, was brought to bed on the 28th of January last. The labour was natural and of short duration. She continued doing well until the 3d of February, when a severe attack of pain seized her in her right side, with cough and difficulty of breathing. These symptoms she attributed to cold. One bleeding, followed by purging with calomel and jalap, aided by fomentations, removed the whole of her ailments.

February 27th, three weeks after this attack, she had a shivering fit, followed by fever, accompanied with violent head-ache, pain in the right hypochondrium, paucity of urine, diminished secretion of milk, and costiveness. The pulse was 120. She was first freely bled, then purged with calomel and jalap, fomented, and afterwards kept on the lowest regimen. On the following day the bleeding was repeated; and on the 4th of March, six days from the seizure of the symptoms, convalescence ensued.



## CASE IV.

Mrs. D., a lady in a tolerable state of health, was brought to bed of her fourth child about three o'clock in the morning of the 25th of March last of a girl, after a short, but sharp labour. The case was footling. On the following day, the after-pains being unusually troublesome, she was ordered to be purged with phosphorated soda and infusion of senna, which in six hours operated freely, and produced some alleviation of pain. About one o'clock of the morning of the 27th, she was seized with a shivering fit, sharp pain in the umbilical and hypogastric regions, suppression of the lochia, high fever, with the pulse 130, great thirst, and the secretion of milk suppressed. I took sixteen ounces of blood from her; and Dr. Haighton was requested to meet me in consultation. It was agreed to continue the purging. In the evening, although several dark-coloured and offensive stools had been procured, yet the frequency of the pulse was undiminished: the bleeding was therefore repeated. Next day, the 28th, the symptoms were mitigated, and the pulse was only 110; but another bleeding was thought to be advisable, with warm fomentations to the bowels. At the same time, in order to promote the intestinal action, sulphate of magnesia was prescribed in doses of one drachm given every four hours. By these means twelve evacuations were procured daily, which diminished the frequency of the pulse, and lessened the pain and febrile symptoms.

The head was but slightly affected; but the patient complained of being greatly confused. On the 29th and 30th the pulse was at 100, with diminution of abdominal pain, less confusion of the head, abundant secretion of milk, and an appearance of the lochia; but on the 31st, the abdominal pain returning, with great sense of soreness, the bleeding was repeated; by which means the pulse was reduced to 80, with complete remission of pain.

During the whole of her illness the patient inclined on her back, no other position being tolerated.

As the stools continued bilious, dark-coloured, and highly offensive, attended with thirst, and occasional flushes of heat, some doses of calomel and jalap were administered, and the saline purgatives continued at more distant intervals, until the alvine secretions changed, and convalescence ensued. These desirable results, however, were not accomplished till April the 12th, being sixteen days from the commencement of the attack.

## CASE V.

Mrs. A. was brought to bed of her sixth child, on the 27th of last March. Nothing peculiar attended the labour. About a month prior to her confinement, however, she laboured under

hepatitis, for the relief of which she was three times bled from the arm, had leeches and blisters applied to her side, and was confined to the strictest antiphlogistic regimen; while calomel and salts were exhibited internally, for the removal of the morbid secretions.

On the 28th, the day after her labour, she was gently purged with phosphorated soda and senna. On the 30th she was attacked early in the morning with a shivering fit and pain in the head: the pulse was 130; there was acute pain in the umbilical region, with a diminished secretion of milk, and of the lochical discharge. The symptoms were so pressing, that, notwithstanding the previous bleeding, I took two pints of blood from her arm in the day, with great relief to the symptoms. As a troublesome cough supervened, and two days afterwards (April the 1st) there was an accession of fever, I was induced to repeat the bleeding; at the same time the saline purgatives were continued without intermission. Under this treatment a favourable change took place on the 4th of April; and a speedy convalescence followed.

The patient is now completely recovered, having no other complaint than weakness.

#### REMARKS.

THE principal feature in these cases, and some others formerly reported by me in the *Repository*\*, is their favourable termination under the antiphlogistic treatment. The venesection employed at the outset, and repeated according to the urgency of symptoms, arrested the immediate progress of the disease; while active purging accomplished the cure. This plan of treatment has been equally successful in the hands of other practitioners, as is evinced by the publications of Dr. Gordon of Aberdeen, Dr. Armstrong of Sunderland, and Mr. Hey, junior, of Leeds.

As puerperal fever has within the last four years extended its ravages in the North, and is now spreading its destructive influence in the South, the discovery of a method to arrest its progress becomes an object of the first importance. The primal consideration for inquiry is, whether the disease be contagious? On this subject professional men differ.—My own opinion is, that this disease is highly contagious; and my cases are in proof of my opinion. But there are other facts more strikingly convincing.—Professor Young, of Edinburgh, was so satisfied of the contagious nature of puerperal fever, from the circumstance of every new patient admitted into the Infirmary becoming infected, that he was obliged to clear all the wards, have them white-washed,

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\* Vol. ii. p. 357.

ventilated, and dried with stoves; after which the disease ceased to make its attacks. In addition to this evidence may be added that of Dr. Haighton, who was so convinced of its infectious power, that, when it prevailed in his lying-in-house, he was under the necessity of interdicting his pupils from visiting out-door patients, to prevent the propagation of the virus. None but pregnant women were under its influence; and if they were admitted a month or six weeks before the termination of pregnancy, they were sure to fall sick a few days after their confinement. It appears, therefore, that the effluvia of a patient under puerperal fever is an animal poison *sui generis*, capable of acting on pregnant females, their situation giving the predisposition necessary for the operation of its influence.

Whether a woman can be affected with this fever more than once in her life, my experience does not determine.

Candour compels me to observe, that, since my cases occurred, my friend Mr. Burrows very kindly and humanely cautioned me on this subject, and to strengthen his opinion, transmitted me the following information. I have since taken the precaution to wash myself and change my clothes before visiting the uninfected. The usual mode of communication of infection in private practice is, the being visited by female friends, which I have done all in my power to prevent. Mr. Burrows also informed me, that Dr. Ramsbotham had stated to him the following circumstance illustrative of its contagious nature:—"A midwife lost a patient in puerperal fever; the next she attended at another part of the town died of it; and then another, at a different part. She was greatly alarmed, and consulted Dr. Ramsbotham what she should do. He properly advised her to quit practice and London for a fortnight. She did so; and the mischief ceased."

From these facts we are justified in regarding puerperal fever as decidedly contagious; and it behoves every practitioner, when he meets with the disease, to explain to the friends of the patient its peculiar nature in this respect; to let no person attend upon her but the nurse, and some selected relation or friend; to exclude all pregnant females from the house; and not to permit the nurse and her chosen friend to go abroad and visit pregnant women. After the recovery of any case also, the apartment should be well ventilated, white-washed, and dried by stoves. This precaution may interrupt the propagation of the disease, otherwise no person can tell how many may fall sacrifices to it.

As a prophylactic, I would recommend, when it prevails in a neighbourhood as an epidemic, that every pregnant female lose blood once, or twice, between the fifth and eighth month, to lessen the phlogistic diathesis, which, should the disease



occur, may moderate its violence. As the bowels are apt to be loaded with morbid matter, highly offensive and discoloured, they should be kept moderately open with magnesia, or rhubarb, and soap or aloetic pills, combined with extract of henbane, to prevent griping, as recommended by Professor Hamilton of Edinburgh. By these means the disease may be moderated, if not altogether prevented. During the prevalence of puerperal fever also, pregnant women should drink toast tea, or thin barley water, with lemon peel, instead of porter, wine, or diluted spirits, of which so much is improperly taken under the erroneous idea of supporting strength.

If these observations should prevent the frequency of this dreadful malady in the objects of our best affections, at one of the most interesting moments of their lives, even in a limited degree, I shall feel a satisfaction more easily to be conceived by those who possess proper feelings than can be expressed by language.

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